

# Electronic Filing System (EFS) Data Electronic Patent Application Submission USPTO Use Only

3627 B

EFS ID:

41269

Application ID:

09276277

GROUP 3600

Title of Invention:

FLOW PROBE CONNECTIVITY DETERMINATION

First Named Inventor:

William Bullard

Domestic/Foreign Application:

**Domestic Application** 

Filing Date:

1999-03-25

Effective Receipt Date:

2003-06-02

Submission Type:

Information Disclosure

Statement

Filing Type:

Confirmation number:

1888

Attorney Docket Number:

7000-174

Total Fees Authorized:

180.0

Payment Category:

Credit Card

Credit Card Number:

\*\*\*\*\*\*1002

**Expiration Date:** 

04302004

Card Holder Name:

Benjamin S. Withrow

Postal Code:

27512

**RAM Payment Status:** 

**RAM success** 

RAM User ID:

**EFSPROD** 

**RAM Accounting Date:** 

2003-06-02

**RAM Sequence Number:** 

701557

Digital Certificate Holder: cn=Benjamin Withrow,ou=Registered Attorneys,ou=Patent and Trademark

Office,ou=Department of Commerce,o=U.S. Government,c=US

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#### **TRANSMITTAL**

Electronic VANCY v1.1 Stylesheet Version v1.1.0

Title of Invention

FLOW PROBE CONNECTIVITY DETERMINATION

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09/276277

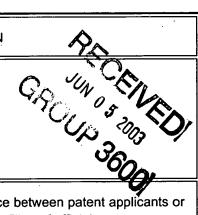
First Named Applicant:

1999-03-25 William C. Bullard

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Submitted by:	Elec. Sign.	Sign. Capacity
Benjamin S. Withrow Registered Number: 40,876	/Benjamin S. Withrow/	Attorney

Documents being submitted

**Files** 

us-ids

IDS2-usidst.xml

us-ids.dtd

us-ids.xsl

us-fee-sheet

IDS2-usfees.xml

us-fee-sheet.xsl

us-fee-sheet.dtd

### Comments

Additional non-patent references for this application are being submitted via first class mail on the same date as this electronic submission. The fees for such are included with this electronic submission.



#### **FEE TRANSMITTAL**

Electronic Version Stylesheet Version v08.0

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William C. Bullard

Attorney Docket Number: 7000-174

Art Unit:

3627

Examiner:

Andrew Rudy

# **TOTAL FEE AUTHORIZED \$180**

GROUP 3600, Patent fees are subject to annual revisions on or about October 1st of each year.

#### **BASIC FILING FEE**

Fee Description	Fee Code	Amount \$	Fee Paid \$
Submission Of Information Disclosure Stmt Fee	1806	180	180

## **AUTHORIZED BILLING INFORMATION**

The commissioner is hereby authorized to charge indicated fees and credit any overpayments to:

Credit account number:

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Expiration Date (YYYYMMDD): 2004-04-30

Authorized name:

Benjamin S. Withrow

Billing address:

27512



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Electronic Version VORADEM Stylesheet Version v08.0

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